BEST AVAILABLE COPY

PATENT APPLICATION FEE DETERMINATION RECORD Effective October 1, 2000 O9/927993													
CLAIMS AS FILED - PART I (Column 1) (Column 2)								SMALL ENTITY TYPE		OR	OTHER THAN SMALL ENTITY		
TOTAL CLAIMS			47		3		R	ATE	FEE	1	RATE	FEE	
FOR			NUMBER FILED		NUMBER EXTRA		BAS	IC FEE	355.00	OR	BASIC FEE	710.00	
TOTAL CHARGEABLE CLAIMS			47 minus 20=		· 27		×	\$ 9=		OR	X\$18 ≃	486 a	
INDEPENDENT CLAIMS			minus 3 =		• 5		— ×	40=		OR	X80=	400 w	
MULTIPLE DEPENDENT CLAIM PRESENT							135=			+270=	· ((A): (A)		
* If the difference in column 1 is less than zero, enter "0" in column 2							<u> </u>			OR	TOTAL	1,596.	,_
								DTAL	<u> </u>	OR	OTHER		00
4-22-04 CLAIMS AS AMENDED - PART II (Column 1) (Column 2) (Column 3)							SI	MALL	ENTITY	OR	SMALL		1
AMENDMENT A		CLAIMS REMAINING - AFTER AMENDMENT		PREVI	HEST IBER OUSLY FOR	PRESENT EXTRA	R	ATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	T tal	• 33	Minus	L	17	= /	×	\$ 9=		OR	X\$18=		
	Independent	. 5	Minus	***	8	= /	×	40=		OR	X80=		
Ľ	FIRST PRESE	NTATION OF M	ULTIPLE DEP	ENDEN	TCLAIM		1	135=	·	OR	+270=		1
							ADD	TOTAL		OR	TOTAL ADDIT, FEE		1
1	1-23-0	(Column 1)		(Colu	mn 2)	(Column 3)	,				,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		1
AMENDMENT B	3	CLAIMS REMAINING AFTER AMENDMENT		NUA PREVI	HEST MBER HOUSLY FOR	PRESENT EXTRA	F	ATE	ADDI- TIONAL FEE	·	RATE	ADDI- TIONAL FEE	
	Total	. 33	Minus	2	17	= /	×	\$ 9=		OR	X\$18=		
	Independent	. 5	Minus	***	8	= /	,	(40 =		OR	X80=		1
L	FIRST PRESE	NTATION OF M	ULTIPLE DEF	PENDEN	T CLAIM		1	135=		OR	+270=		1
	·							TOTAL IT. FEE		OR	TOTAL ADDIT. FEE]
(Column 1) (Column 2) (Column 3)													
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT		NUN PREV	HEST MBER IOUSLY FOR	PRESENT EXTRA	F	ATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	T tal	•	Minus	••		=	X	\$ 9=		OR	X\$18=		
	Independent	•	Minus	***		-		40=		OR	X80=		1
Ľ	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							135=		1	+270=		1
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3. ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."									_	OR	TOTAL		1
••	If the "Highest Nu	mber Previously P imber Previously P inber Previously Pa	aid For" IN THI	S SPACE S SPACE	is less that is less that	an 20, enter "20." an 3. enter "3."		TOTAL IT. FEE in the ap	propriate bo	OR ox in co	ADDIT. FEE		1

Application or Docket Number